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NAVY POLICY ON PREGNANCY

During a 2-hour National Review Firing Line debate on PBS in March of 1993, retired Marine Col. John Ripley, a highly decorated Vietnam War hero, asked retired Air Force Brig. Gen. Wilma Vaught why she had stated in an earlier interview that depending on what month they were in, even pregnant women should be allowed to serve in combat units. Inquired Col. Ripley, "Would you please tell us, [General Vaught]: What month is okay for pregnant women to fight, to be in combat?"

After some hesitation, Gen. Vaught stood by her statement, insisting that "There are women who are capable of doing many, many things up to a very late period of their pregnancy." At that point, Col. Ripley brought down the house with "Well, that's wonderful. I am sure the personnel people will be happy to know they are getting two for one."

Two years later, something approaching Gen. Vaught's bizarre philosophy has become official policy. Directives issued by Navy Secretary Dalton on February 6, 1995 fearlessly assert that depending on what month it is, and regardless of marital status, "Pregnancy and parenthood are compatible with a naval career."

The four-page document, produced after months of deliberation by the Navy's 20-member Standing Committee on Military and Civilian Women, reflects the misguided strategies of civilian programs that have worked to undermine families and increase the incidence of pregnancy outside of marriage.

A growing consensus has formed in the civilian world that because certain well-meaning social welfare policies have had the perverse effect of increasing rates of teenage pregnancy and single parenthood, such policies should be phased out or replaced. But instead of following the trend toward constructive reform, the Navy is sailing off in the opposite direction.

The new policy affirms and increases benefits to pregnant women, regardless of marital status, and combines those nonjudgmental benefits with aggressive recruiting goals for women.

Taken together, elements of the overly-generous, morally-neutral directives are likely to demonstrate a long-standing principle of government policy: When you subsidize something, you get more of it. In this case, the "something" is pregnancy, among single and married Navy women, who may or may not be available for deployment when the Navy needs them most.

By focusing primarily on the perceived interests of pregnant women, the Navy has devalued the interests of others concerned: fleet commanders, the children of Navy mothers—both before and after birth—and the nation, whose security needs should not be given secondary importance. Prudent family policies must balance the needs of all four.

Pregnancy on the U.S.S. Eisenhower

This issue assumes greater importance with the recent large-scale introduction of women to combatant vessels in 1994, starting with the aircraft carrier U.S.S. *Eisenhower*. On January 29, 1995, Navy officials revealed that 5 pregnant women had been evacuated from the *Eisenhower*—but that was only the beginning of the story.

The Center for Military Readiness soon learned that 24 other women assigned to the *Eisenhower* did not deploy, because of pregnancy. Of these, 14 took leave between April 1 and October 1, 1994, and 10 more left in the last three weeks prior to the ship's October 20 deployment date.

In a March 19, 1995 Washington Post story about sexual misconduct on the *Ike*, (an enlisted man showed fellow sailors a videotape of himself having consensual sex with an enlisted woman) was the news that 9 more women had been evacuated from the carrier. On March 23, the Virginian Pilot reported that yet another pregnant woman had left the ship, rounding out the number to 15 evacuees this year, a total of 39 pregnancies since April of 1994, and still counting.

The Navy has also announced that 171 men left the *Eisenhower* for medical reasons since April 1, 1994. That number represents about 4 percent of the 4,552 men, while 56 of the 415 women assigned to the ship (39 pregnancies plus 17 more on medical leave) constitutes about 13 percent.¹

In summary, women have left the *Eisenhower* for medical reasons at a rate more than three times greater than men,

primarily due to pregnancy. Final figures won't be in until the ship returns to Norfolk in April, but the ratio is approaching that recorded during Desert Shield and Storm, when pregnancies averaged about 10 percent, and women were 3 to 4 times as non-deployable as men—not counting those taking discharges.

Vacant billets on ships constitute an inherent readiness problem, particularly since berthing spaces assigned to women can only be filled by other women. As aggressive recruiting quotas increase the numbers of women on ships, the negative effect on readiness will become more troublesome, especially on smaller ships such as frigates, cruisers, and destroyers, which have fewer people available for round-the-clock crew rotation.

In response to an inquiry, the Navy informed the 1992 Presidential Commission on the Assignment of Women in the Armed Forces that combat ships are deployed for longer periods than non-combat vessels, and that *"pregnant women may not immediately be replaced. An increase in the number of women aboard ships with high OPTEMPO exacerbates this potential manning shortage problem."* This does not seem to be a concern, however, to Navy authorities who seem determined to proclaim the experiment a success—no matter what.

The Dalton Policy on Pregnancy in the Navy

Deliberations of the 20 member Navy working group working on recommendations for a new pregnancy policy lacked consensus, but on February 6, 1995, Secretary Dalton issued a 4-page "Department of Navy (DON) Policy on Pregnancy" designated SECNAVINST 1000, ASN (M&RA). The following is a summary and analysis of that document, following the original outline:

1. Purpose

From the outset, the Dalton Plan sets misdirected priorities for policies intended *"...to ensure equality of opportunity while maintaining operational readiness."*

- The directives focus almost entirely on the *"career and welfare"* of women expected to be non-deployable for many months, but measures to protect operational readiness are conspicuously scarce.
- This demotion of operational problems to secondary status further complicates the already difficult "downsizing" process. With fewer ships and an increase in "peacekeeping" missions, the readiness of Navy crewmembers to deploy worldwide on short notice is even more important, not less so.

The policy provides for an expansion of *"requirements for education and training,"* which may be useful, but not the definitive answer.

- On February 7, 1995, the Washington Post noted that *"Navy studies have shown that existing sex education programs have not had any impact on pregnancy planning."*
- A June, 1989 Navy study found that *"Despite the widespread availability of sex education programs in the United States, the rate of unplanned pregnancies among women continues to rise, a trend reflected in the number of Navy women who become pregnant during their first enlistment."* (NPRDC TN 89-23)

The document's call for the collection and analysis of objective data to be used in evaluating Navy pregnancy policies may be helpful, but only if it is primarily related to operational requirements, rather than "career opportunities."

2. Applicability

The pregnancy policy applies to Navy and Marine Corps personnel, both Regular and Reserve, except midshipmen.

- Navy regulations allow women to serve aboard ship through the 20th week of pregnancy, until deployment, provided they can be evacuated to a medical treatment facility within six hours. The Marine Corps does not permit deployment of pregnant women on ships for any length of time.
- Medical tests for pregnancy and other factors, such as HIV status or dental health, are required before a change of duty station. Such tests are not required, however, just prior to deployment overseas.

3. Background

This section begins by stating the obvious: *"A full complement of highly trained personnel is essential to maintaining operational readiness in deployable units."* After noting that women are full participating members of the Navy-Marine Corps team, the policy goes on to declare that *"...pregnancy is a natural event that can occur in the lives of Navy and Marine Corps servicewomen, and is not (sic) a presumption of medical capacity. Pregnancy could affect a command's operational readiness by temporarily limiting a servicewoman's ability and availability to perform all assigned tasks."*

- There is no doubt that pregnancy is a "natural" event, but whether it is "natural" aboard warships is another question. In a February 22, 1995 commentary for Soundings, Navy Capt. David R. Carlson commented that the above statement *"...is as close as the instruction comes to admitting that there might be a potential problem here. [The] non-problem gets a non-solution—one little better than just wishing that pregnancies would be less trouble for the Navy."*

- According to a communication from an advisor to the Navy's Surgeon General in August 1993, studies of two Navy tenders showed a pregnancy rate as high as 1 in 3, and 18 percent of female service members become pregnant each year.
- During Desert Storm 1,145 women on ships needed to be reassigned, at an average of 95 per month. (Presidential Commission Finding [CF] 5)
- Women have a lower rate of lost time only when pregnancy and postpartum convalescent leave are excluded. When these factors are included, women have approximately four times as much lost time as men. (Army Times, April 18, 1995)

4. Policy

The policy declares that *"Pregnancy and parenthood are compatible with a naval career. The Department of the Navy (DON) will ensure the health care needs of pregnant servicewomen are met and will accommodate the career and welfare needs of pregnant servicewomen to the greatest extent possible, consistent with the needs of the naval service."*

With studied understatement, the policy also declares that *"Military responsibilities, including the expeditionary nature of our Navy and Marine Corps, often add factors for serious consideration for our servicemen and servicewomen."* It also promises thorough information about family planning and *"the broad range of medical, legal, financial, chaplain and other services available..."* Taken as a whole, the policy implies that the obligations of Navy jobs are secondary to the benefits, and that education is the key to solving all problems.

- Counseling services are always helpful, and widely available. It is not clear whether the new policy will include or encourage abortion or abortion counseling. (An inquiry regarding this and similar questions have been filed with the Navy by CMR and several members of Congress.)

Showing little sensitivity to the joys and problems of pregnancy and motherhood, the policy declares that the services "will provide detailed guidance for the assignment and management of pregnant servicewomen."

- Sensitivity to motherhood is, arguably, not the Navy's job. Still, the bureaucratic determination to "manage" the involuntary assignment of women to combat ships may increase attrition rates among highly-skilled women who don't wish to go to sea for 6 months at a time during their peak child-bearing years.

The policy requires that women returning from pregnancy leave will be returned to the same or an equivalent billet, in the same command whenever possible.

- This is a military version of mandatory family leave, which will complicate the problems of commanders trying to fill vacant spaces on short-handed ships. It sometimes takes months to secure replacements for women lost due to pregnancy.
- A Navy official told the Presidential Commission on March 26, 1992 that the percentage of single mothers in the Navy is 32 percent; the civilian rate is 20 percent. Although they comprise 11.2 percent of the active duty force, women make up 34.7 percent of the single parents. Women are subject to deployment within four months of childbirth.
- According to a 1992 study published by the Navy Personnel Research and Development Center (NPRDC), less than 50 percent of single and dual service parents had a valid Dependent Care Plan, and in a service wide spot check, less than 25 percent of Navy personnel were in compliance with Dependent Care Certificate requirements. (CF 7)

A servicewoman who suspects she is pregnant is "responsible" for prompt confirmation and notification to her commanding officer.

- There is no penalty, however, for violating the notification provision in the Dalton Plan. The Presidential Commission found that some servicewomen conceal their pregnancies for as long as possible, increasing the risk to themselves and the unborn child.
- There is reason for concern about the health risks of nuclear power, hazardous chemicals and fumes, high-decibel noise, aviation vibration, etc. These include miscarriages or life-threatening ectopic pregnancies, or birth defects such as sight or hearing loss.
- The carrier *Eisenhower* does not have a doctor of obstetrics and gynecology (OB/GYN) on board, and smaller ships have medical corpsmen, not doctors.
- In recent years, at least five babies are known to have been born on Navy ships, one of which died shortly after birth. (Navy Times, February 7, 1994, and European Stars and Stripes, July 19, 1994.)

The new policy offers generous housing benefits to pregnant women, regardless of marital status, or the circumstances under which the pregnancy occurred.

"... a pregnant active duty servicewoman with no family members may reside in Bachelor Quarters for her full term. If the servicewoman requests, the host commander may authorize ...off-base housing and a basic allowance for quarters (BAQ) up to her 20th week of pregnancy. From the 20th week forward, the host commander

must approve such a request... "

- Extra BAQ allowances are usually not available in the lower enlisted ranks (E-4 and below). The extra money could have the same counter-productive effect as similar subsidies in the civilian world, which discourage marriage and subsidize teenage parenthood.
- The more comfortable living arrangements, and the option to spend more time pursuing higher education or caring for other children, also encourage resentment by men who cannot claim pregnancy as a reason to avoid deployment.

As is the case with all active duty personnel, pregnant servicewomen will receive priority OB/GYN care in all Navy facilities, ahead of other uniformed personnel, three months prior to imminent deployment.

- Still, pregnancy tests just prior to deployment are not required, which puts fleet commanders at a disadvantage, and unborn children at greater risk. (Navy regulations only require such tests when a person is assigned to a new station.)
- With base closures and sharp cutbacks in military doctors, family members may have to wait much longer for medical care as numbers of active duty pregnant women increase.

Medical limitations, assignment restrictions, and/or periods of absence due to pregnancy or associated medical care "shall not be the basis for downgrading marks or adverse comments."

- This provision is vague, but pernicious in its implications. Anyone commenting on any aspect of problems connected to pregnancy could face severe career penalties.
- Off limits, for example, would be comments about the fact that replacements for pregnant women are often not provided for as long as a year, causing other crew members to work longer shifts. Instead of 6-hour shifts around the clock, some officers on non-combatant vessels have had to work 12-hour shifts, or share duties in more than one job.

The Policy provides that a pregnant servicewoman may request separation from active duty, but such requests "will not normally be approved unless there are extenuating circumstances..."

- During Desert Shield and Storm, the services reported significant increases in the numbers of women who were discharged, voluntarily or involuntarily, because of pregnancy.
- These numbers are separate from the non-deployability rates, which were 3 to 4 times higher among women than men. According to an August 1992 General Accounting Office report, the effect on readiness was masked somewhat because of the long lead-time for mobilization. (CF 16, 17) Today's drawn-down forces, however, may not have the same options.

The Policy offers "available legal assistance for advice regarding [servicemembers] options in establishing paternity."

- Conspicuously missing is a requirement that an unmarried pregnant woman identify the father of her child. Nor does this section establish penalties for becoming pregnant, or causing a pregnancy during deployment.
- By assuming a posture of moral neutrality, the Navy has made a serious value judgment that undermines expectations for professionalism and responsible, moral behavior.

5. Action & Report

The Policy provides for implementation timetables, and calls for the assessment of health care risks associated with pregnancy and other types of medical conditions in certain military environments. There is no deadline, however, for reports on those assessments.

Conclusion

According to Rear Adm. Stephen Barchet, M.D. (Ret.), formerly a member of the U.S. Navy Medical Corps, there are three reasons for taking reasonable steps to minimize exposures of pregnant service members to adverse military environments:

"To protect the unborn; to protect the woman; and to protect the sponsor (in this case, the Navy). As for the latter it is inevitable in our culture that ultimate financial responsibility for all real and imagined untoward results and/or outcomes will be borne by the federal government--i.e., the taxpayer."

The Dalton Pregnancy Policy is a readiness problem in the making, and a disappointment to those who expect sound personnel policies that encourage good order, discipline, high morale, and readiness. Equal opportunity is important, but the needs of the military must come first.

1. Unplanned losses for 221 men and 8 women for administrative, humanitarian, or disciplinary reasons were also revealed on March 20. With those numbers included, without adjustments for the comparative length of time lost, women have been missing at a ratio approaching 2 to 1.